

WATER LEVELS REPORT

Date: _____ Time: _____
Reason: ☐ Routine Weekly Inspection ☐ Rainfall >1 in.

Pond	Observed Level
Stormwater Pond	_____
Finishing Pond	_____
Equalization Pond	_____
Bio Pond	_____
Clarifier Pond	_____

Transfer between ponds necessary: ☐ Yes ☐ No

If Yes, describe transfer:

From Pond:	_____	Final Level	_____	Date/Time	_____
To Pond:	_____	Final Level	_____	Duration	_____
From Pond:	_____	Final Level	_____	Date/Time	_____
To Pond:	_____	Final Level	_____	Duration	_____
From Pond:	_____	Final Level	_____	Date/Time	_____
To Pond:	_____	Final Level	_____	Duration	_____

Comments/Observations:

Less than 3 ft. freeboard left in finishing pond? ☐ Yes* ☐ No+

*If Yes, ADEQ contacted for authorization.

Authorization received from _____ Name: _____ Date/Time: _____

Discharge to Outfall 002 began	Date	_____	Time	_____
Completed	Date	_____	Time	_____

Total Volume Discharged	_____	MG
Flow	_____	MGD
Calibration of Flow Meter		
Observable Impacts on Receiving Water:	_____	

+If No, was there any discharge from Outfall 002		
		<input type="checkbox"/> Yes
		<input type="checkbox"/> No

Operator Signature: _____

Date Submitted to ADEQ: _____

SAMPLING LOG

Parameter	Date/Time				Comments/Observations:
	Grab 1	Grab 2	Grab 3	Grab 4	
BOD5, TOC, COD					
Biomonitoring					
pH		--	--	--	
pH calibration	Buffer		Result		
	Buffer		Result		

Operator Signature: _____

Date: _____